

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000005627

1. Entity Name
ROYAL PALM INVESTMENT GROUP, LLC



Principal Place of Business
**5601 N DIXIE HWY
SUITE 306
FT LAUDERDALE, FL 33334**

Mailing Address
**5601 N DIXIE HWY
SUITE 306
FT LAUDERDALE, FL 33334**



01312008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1108240

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SACKEL, STEPHEN G
5601 N DIXIE HWY
SUITE 306
FT LAUDERDALE, FL 33334**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
SACKEL, STEPHEN G
5601 N DIXIE HWY
FORT LAUDERDALE, FL 33334**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
QUENTZEL, PAUL S
5601 N DIXIE HWY
FORT LAUDERDALE, FL 33334**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGRM
SONDERLING, HOWARD R
5601 DIXIE HWY
FORT LAUDERDALE, FL 33334**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

000000822558
02/20/08-80003-002 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Stephen G Sackel

Date

Daytime Phone #